



**Massachusetts Commonwealth Quality Program  
Product Certification for Manufacturers/Sales Entities**

**FORESTRY**

**I. MANUFACTURER**

I, (name), the undersigned, certified that the following products sold to (name of sales entity) were harvested and produced according to the necessary Commonwealth Quality Program ("Program") standards and practices outlined in the Requirements/General Standards to Registers document, and are therefore qualified to be labeled with and sold using the Commonwealth Quality logo/seal.

Product	Product/Product Line Name	Quantity

Signature of Program Participant \_\_\_\_\_

Date \_\_\_\_\_

**II. WHOLESALE, RETAILER, RESELLER**

I, (name), the undersigned, certify that I am in receipt of the products listed above. I acknowledge that I must keep a copy of this signed, completed document on file and that failure to do so will result in termination from the Program and the revocation of permission to use the Commonwealth Quality logo/seal on any and all products.

Signature of Program Participant \_\_\_\_\_

Date \_\_\_\_\_